

# Employee Self Service for Ohio Northern University

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Workterra is a tool which allows you to directly access and update your employee information via the Internet. Using Workterra employee self-service, you can review and/or update your demographic, dependents, and benefit elections.

- You can access Workterra from any computer with an internet connection
- Our secure (https) site uses the latest technology to ensure that the information entered is secure and adheres to industry security standards.

## User and Legal Agreements

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Please read the Employee Usage and Legal Agreements and click Continue to proceed.

### Employee Usage Agreement

By clicking the **I Agree** button below, I consent, as my electronic signature, to the electronic processing of this application.

I acknowledge that electronic signature means that I am the person identified on this application as the applicant, that I voluntarily accept all the terms and conditions as stated in this application, and that I agree to the electronic processing of this record.

I acknowledge that my electronic submission will have the same legal effect as a signature on paper. I acknowledge that I have the right to print and keep the benefit confirmation statement.

I hereby apply for coverage on the basis of the statements and answers to the questions herein. I hereby declare all answers to be true to the best of my knowledge and to accurately represent those persons applying for coverage and waiving coverage. I understand that these statements, answers and subsequent information I provide are the basis for my coverage. I understand that if my application for new or additional coverage is accepted, that applicable coverage will not be effective until the Effective Date identified in the benefit confirmation statement or a revised date provided in subsequent communication from my Benefit Administrator.

I Agree

### Legal Agreement

I understand that providing false information or omission of relevant information in this application may result in the denial of claims or cancellation or rescission of coverage.

I Agree

Please Read your Welcome Page Information and select **Continue**.

## Welcome Page

Welcome **Alpha Single**

**Ohio Northern University is appreciative of your commitment to public service and your hard work on behalf of our school. For that reason, ONU is very pleased to provide you with a comprehensive employee benefits package. Open enrollment is an excellent time to re-evaluate your benefits. And, with the personalized enrollment session, it is easy to take full advantage of your benefit options.**

**Please read the information carefully, so you can choose the plan(s) that best meets the needs of you and your family. The 2019 Open Enrollment period will continue through **11/30/2018**. If you have any questions, please contact ONU`s Human Resources Office.**

[Forms Library ▶](#)

**Continue**

## Demographics & Dependents

You will have an opportunity to review, add, or update your spouse and child information, as well as, your emergency contact Information on the next few pages.

Please note: Grayed out fields are considered “review only” fields. Please contact your HR administrator if any changes are needed to these fields.

**NEW FOR 2019-** within the Employee Demographics page, you will be required to answer the following question concerning Medicare. Please note that you will not be allowed to move forward until this question is answered. If you are currently enrolled in Medicare, you will not be eligible to open a Health Savings Account through Optum Bank or any employer HSA contribution that would be made into the account.

Are you currently enrolled in Medicare? \*

-Select-

Yes

No

Please ensure that all dependents that you would like to cover across any benefit (Medical, Dental, Spouse Life, Child Life, etc...) are entered within these pages.

Spouse

Add Another Dependent

Child

Add Another Dependent

To add a spouse or child, click Add New. The Add Spouse/ Add Child screen will open for you to enter their demographic information (required data is marked with a red indicator).

Click Save & Continue. If you have multiple children, select “Add Another Dependent” adding them one at a time and click “Save & Continue” once all are added.

[If you do not have a spouse or child, click Continue to proceed to the next page.](#)

For **Disabled Children**, please ensure that you classify the child as a “Disabled Child” in the Child relationship box as well as enter a “yes” in the Disabled child field.

Child Relationship	Date of Relationship	Disabled Child
Disabled child <input type="button" value="v"/>	<input type="text"/>	Yes <input type="button" value="v"/>

Follow the steps below to enroll in your benefit plans.

If you do not wish to enroll and would prefer to decline the benefit, select “Waive this benefit”.

Please note that the following are available for additional information to assist you in choosing your benefits.

- Additional Tools – This houses links to the Forms Library and the plan summaries in Learn about your benefits.
- Compare Plan – Click the Compare Plan box under each plan to open up a side by side comparison of the plans offered to you
- Tools & Calculators – This offers some helpful tools to assist in your benefit election process. (This is only available for the Life and FSA plans)
- Resources (Documents) – This link will contain information for all of your plans, as well as, other company documents

Select Your Benefit Plans

**Medical** Waived

Click to waive Medical benefit Keep Waive Compare Plans | Additional Tools

You can waive the plan by clicking here.

You can compare the plan coverages here, if available.

You can access the Forms Library and benefit summaries here.

**Instructions** Minimize

ONU provides medical insurance, including vision insurance, dental and prescription drug coverage. If elected, your coverage under the plan will become effective on your date of hire. Your monthly premium is based on your annual salary and benefit plan selection. Dependent coverage and multiple benefit plan options are available. For more detailed information, please refer to the annual plan documents and summary plan descriptions available in the forms library or on the Office of Human Resources' page of ONU's website (www.onu.edu/hr). If you have any questions, please contact the Office of Human Resources.

**UMR HDHP Active All**  
Effective Date: 01/01/2019

**Eligible Members**

<input checked="" type="checkbox"/>	Kevin Test	Employee
<input type="checkbox"/>	Julie Test	Spouse
<input type="checkbox"/>	Jenny Test	Natural child
<input type="checkbox"/>	Mary Test	Natural child

**Total Cost**

Employer Cost	\$0.00/ Semi-monthly
Employee Cost	<b>\$0.00/ Semi-monthly</b>

**Step 1:** Select your covered members that you would like to enroll in the plan

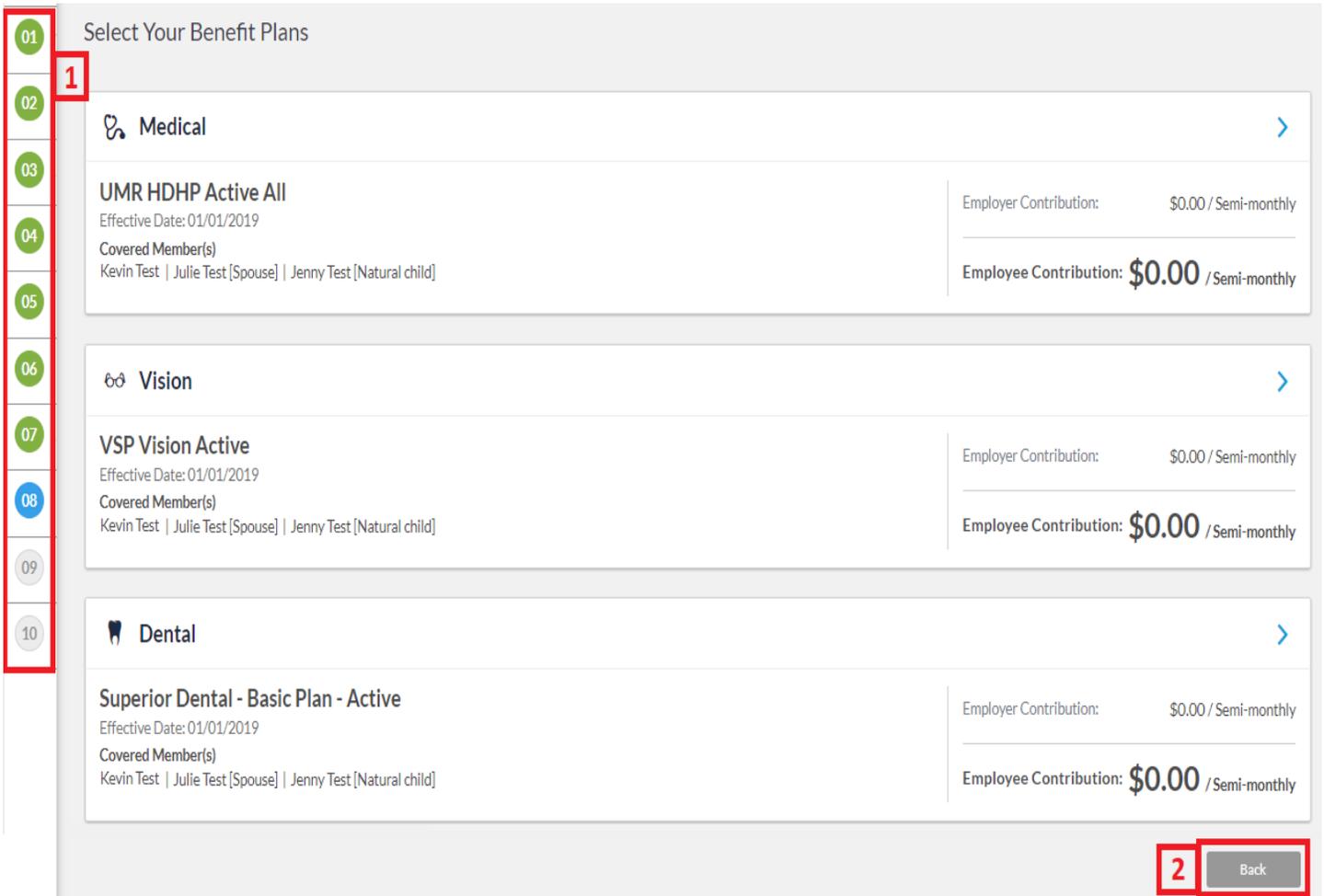
**Step 2:** Go to the plan you would like to enroll in, click the **Enroll** button & then you will be driven to your next plan. For HSA plans, after selecting **Enroll**, you will then need to select **Continue**.

**Enroll Now**

Please be sure to use only the navigational buttons provided within the tool. Do not use your browser's back button.

You can navigate into previous pages using these two options:

1. The slide out menu bar will allow you to move back to any page that you have previously visited
2. Use the back button provided by the tool



**01** Select Your Benefit Plans

**1**

**02**

**03**

**04**

**05**

**06**

**07**

**08**

**09**

**10**

**Medical**

**UMR HDHP Active All**  
Effective Date: 01/01/2019  
Covered Member(s)  
Kevin Test | Julie Test [Spouse] | Jenny Test [Natural child]

Employer Contribution: \$0.00 / Semi-monthly

Employee Contribution: **\$0.00** / Semi-monthly

**Vision**

**VSP Vision Active**  
Effective Date: 01/01/2019  
Covered Member(s)  
Kevin Test | Julie Test [Spouse] | Jenny Test [Natural child]

Employer Contribution: \$0.00 / Semi-monthly

Employee Contribution: **\$0.00** / Semi-monthly

**Dental**

**Superior Dental - Basic Plan - Active**  
Effective Date: 01/01/2019  
Covered Member(s)  
Kevin Test | Julie Test [Spouse] | Jenny Test [Natural child]

Employer Contribution: \$0.00 / Semi-monthly

Employee Contribution: **\$0.00** / Semi-monthly

**2** Back

## Child Voluntary Life and AD&D Student Status

New for 2019- In order to be enrolled in Child Voluntary Life and AD&D, any child between the ages of 19 and 25 must be a full-time student. If you child is above the age of 19, please answer the question using the drop down arrow to the right and, if needed, list the full name and the name of the College or University in which any dependent that is considered a full-time college student attends in the appropriate space below. If your child is above the age of 19 and not a full-time college student, they will not be eligible to stay enrolled in the Child Voluntary Life and AD&D.

 Child Voluntary Life and AD&D Student Status ▼

**In order to be enrolled in Child Voluntary Life and AD&D, any child between the ages of 19 and 25 must be a full-time student. Please answer the question below and, if needed, list the full name and the name of the College or University in which any dependent that is considered a full-time college student attends.**

Are you electing to enroll a dependent in Child Voluntary Life and ADD coverage that is over the age of 19 and considered a full-time student?

Yes ▼

If you answered "Yes" to the question above, please list the full name, date of birth and school of each full-time college student in your family that is over the age of 19 here.

Alpha Test Jr 10/16/1996 Ohio Northern University

Effective Date  
01/01/2019

[Reset](#) [Confirm](#)

## TIAA Retirement Benefits

Ohio Northern provides retirement savings using a 403(b) retirement plan with TIAA. If you wish to participate in the TIAA Retirement plans, please download the appropriate TIAA Agreement from this page or the Forms Library and return this form to the Office of Human Resources or upload this form to the WORKTERRA site on the UPLOAD DOCUMENTS page.

Note: There are different forms for Full-Time and Part-Time employees, therefore if you are a FULL-TIME employee use the Full-Time form, if you are a PART-TIME employee use the Part-Time form.

Also as a reminder, changes to your TIAA contributions can be made at any time during the year; however once started, if you do not submit an updated form to Human Resources, your deduction will continue at the current contribution rate.

For more information on the TIAA Retirement plans, please visit the link below.

[http://www.onu.edu/human\\_resources/benefits/retirement\\_program](http://www.onu.edu/human_resources/benefits/retirement_program)

## Adding a new beneficiary:

Your dependents (Spouse and children) that are already entered into Workterra will be in the beneficiary pool.

1. Select your first beneficiary:
  - a. To select an existing dependent as a beneficiary, select their name in the drop down
  - b. If you would like to add another beneficiary, select the applicable relationship in the drop down menu
    - i. A pop up box will appear asking for more information on your new beneficiary. Complete the fields and click done.
2. Enter the percentage for this beneficiary in the "percentage" field

You may also add secondary (contingent) beneficiaries by clicking on the button "Add Secondary Beneficiary"

## Best practices for choosing multiple beneficiaries:

- Use whole numbers when updating the percentage
- Percentages must equal 100
  - For example: 3 beneficiaries should have the percentage of 33, 33, 34

## Other tips:

- To add multiple beneficiaries click on the plus sign 
- To remove a beneficiary, click on the delete icon  to the right of the beneficiary name.
- A beneficiary should not be used twice in the same plan.
  - For instance, on the basic life plan, do not have your spouse listed twice as a primary beneficiary.

01

Beneficiaries

Instructions

- Please assign beneficiaries for the benefit plans shown below.
- Depending on the plan, you may be able to assign secondary beneficiary tier.
- Within each tier, you may have one or more beneficiaries (as long as the total adds up to 100%).
- You can either choose a beneficiary from your saved dependents or create new a beneficiary.
- Click on [?] for more information on how to manage your beneficiaries.

?

🖨

Employee Basic Life and AD&D - Employee Basic Life and AD&D

Save

Primary

Select Relationship	Percentage (%)		Select Relationship	Percentage (%)	
Julie Test[Spouse] <span style="font-size: 10px;">▼</span>	50	+ ✎ 🗑	Test Hsp[Ex-Spouse] <span style="font-size: 10px;">▼</span>	50	+ ✎ 🗑

Add Secondary Beneficiary

Assign same beneficiaries to all plans

Employee Voluntary Life and AD&D - Employee Voluntary Life and AD&D

Edit

Primary

Julie Test Spouse	100 %	
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Add Secondary Beneficiary

## Completing the Enrollment Process

After completing all of your plan elections you will come to the Confirmation Page. Please review all of your elections for accuracy.

Please be sure to keep a copy of the confirmation statement for your records by clicking on the  PDF button to download save & print

After you have clicked on finish, you will be taken to your Employee Home Page. Your enrollment process is now complete.

### Confirmation Statement






**Kevin Test**  
Asst Prof of Pharmacy

Date of Birth August 2, 1978 (39 years)	Gender Male	Address 309 WildLn Adane OH 71989
Social Security Number XXXXX4006		

Current Enrollment Summary	CURRENT ENROLLMENT SUMMARY			
	PLAN NAME	COVERAGE	EMPLOYEE COST	EMPLOYER COST
Future Enrollment Summary	UMR HDHP Active All (Pre-tax) Effective 01/01/2018- 12/31/2018	Kevin Test (Employee) Julie Test (Spouse) Jenny Test (Natural child)	\$240.00	\$446.50
Demographics	Superior Dental - Basic Plan - Active (Pre-tax) Effective 01/01/2016- 12/31/2018	Kevin Test (Employee) Julie Test (Spouse) Jenny Test (Natural child)	\$0.00	\$29.28
Dependent Information	VSP Vision Active (Pre-tax) Effective 01/01/2018- 12/31/2018	Kevin Test (Employee) Julie Test (Spouse) Jenny Test (Natural child)	Current Coverage \$20,000.00 Elected Coverage \$60,000.00 (EE cost \$2.10)	\$0.00
Waived Benefits	Employee Voluntary Life and AD&D (Post-tax) Effective 01/01/2018	Kevin Test (Employee) Current Coverage \$220,000.00 Elected Coverage \$250,000.00 (EE cost \$14.63)	\$12.87	\$0.00
Acceptance	<b>Primary Beneficiary</b> Julie Test (Spouse) 100%			
<b>DEPENDENT INFORMATION</b>				
	Julie Test (Spouse)	Date of Birth 11/26/1977	Gender Female	Social Security Number 421859039
	Jenny Test (Natural child)	Date of Birth 11/29/2005	Gender Female	Social Security Number 402654515
	Mary Test (Natural child)	Date of Birth 11/14/2007	Gender Female	Social Security Number 400693259
<b>WAIVED BENEFITS</b>				
	BENEFIT PLAN TYPE	REASON		WAIVER DATE
	Flexible Spending Account			1/1/2019
	Dependent Care Spending Account			1/1/2019


**Finish**

Please note "Elected Coverage" is the coverage that is pending for EOI.

Once you have completed reviewing your elections, you can click "Finish" to complete the Enrollment process.

## Year-round Access & Qualifying Events

(HOME PAGE NAVIGATION & MAKING QUALIFYING EVENT CHANGES)

Below is an example of your Employee Home Page.

**Kevin Test**  
Asst Prof of Pharmacy

Work Email: Test@Test.com  
Work Phone:  
Manager:  
Hire Date: 08/19/2014

Spouse **2**    Child **4**

**Quick Links**

- Eligibility Report >
- Enrollment Report >
- Plan Comparison Tool >
- Learn about your Benefits >
- Tools and Calculators >

**Current Benefits**

**Out of Pocket** \$526.56 / Semi-monthly

**Medical**

- UMR HDHP Active All \$240.00 / Semi-monthly

**Dental**

- Superior Dental - Basic Plan - Ac... \$0.00 / Semi-monthly

**Vision**

- VSP Vision Active \$0.00 / Semi-monthly

**Dependent Care Spending Account**

- 2018 Dependent Care Spending ... \$20.83 / Semi-monthly

195 Day(s) remaining to enroll for your next year benefits.

**Change Elections**

**Favorite Actions**

- Initiate Qualifying Event
- Upload Documents
- Demographics
- Enroll Now
- Forms Library

**Enrollment Cost**

Spouse Voluntary Life and A...    Child Voluntary Life and AD&D:



**Income Protection**  
Benefits: **100%**

Employee Voluntary Life and AD&D:

**The 'Change Elections' button is available throughout the year to make Life Event changes.**

**You can initiate a life event by clicking here**

**You can access Forms Library by clicking the tile**

To begin a Qualifying Event (i.e. Marriage, Newborn, Divorce, etc.) click on the "Change" button found on the Home Page.

Then select the Qualifying Event that applies to you, enter the date of the event, and click "Save". The system will now walk you through your personalized experience.

Please note the following in regards to Qualifying Events:

- To initiate a Qualifying Event, while still within your Open Enrollment period, go to the 'Initiate Qualifying Events' tile.
- Please ensure the dependent relationship type is updated when processing a Qualifying Event, as this determines eligibility e.g. If processing a Divorce QE you must change your spouse relationship type from spouse to ex-spouse. This will ensure that the system will terminate the spouse's benefits and generate the notification for COBRA.
- During a Qualifying Event, Beneficiary designation will be available after your plan change is approved by the administrator. To view or change your Beneficiaries outside of an open window, go to: My Benefits > Beneficiary
- During a Qualifying Event, you will have the opportunity to upload the appropriate supporting documents (i.e. marriage certificate, birth certificate, etc.) for your HR Administrator approval. Please be sure to upload your document in the upload document page.

**Initiate Qualifying Events**

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Event Name

- Adoption (Official Date of Adoption)
- Birth (Date of Birth)
- Change of Coverage